

**THAD0104 - Oral Abstract**
**TITLE**

**The impact of end-demand legislation on sex workers' utilization of HIV care, health and community-led support services in a Canadian setting**

**PRESENTER**

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**Background:** Despite scientific and legal evidence on the harms of criminalization of sex work, Canada adopted new end-demand legislation - the Protection of Communities and Exploited Persons Act (PCEPA) - in 2014 that criminalizes new aspects of sex work (e.g., clients, third party advertising). One of the explicit goals of end-demand approaches is to increase access to services and supports for sex workers, despite substantial evidence that criminalization impedes access. This study aimed to longitudinally evaluate the impact of the PCEPA on sex workers' access to HIV care, primary care, and community/sex worker-led services in Vancouver, Canada.

**Methods:** Data were drawn from a prospective community-based cohort of women sex workers, known as AESHA (An Evaluation of Sex Workers Health Access) represented by experiential team members. Multivariable logistic regression with generalized estimating equations (GEE) examined the independent effect of the post-PCEPA period (2015-2017) versus the pre-PCEPA period (2010-2013) on sex workers' utilization of HIV care and community-driven services and supports, using time-updated data.

**Results:** In separate multivariable confounding models, the post-PCEPA period was independently correlated with significantly reduced odds of utilizing community-driven (e.g., sex worker-led, Indigenous, migrant/refugee, women or youth-specific) services and supports (AOR 0.60; 95%CI: 0.49-0.73). There was no evidence of increased access to HIV-specific services among sex workers living with HIV following implementation of the new laws (AOR 1.30; 95%CI: 0.85-2.00). The post-PCEPA period was also correlated with significantly reduced odds of accessing health services when needed (AOR 0.59; 95%CI: 0.45-0.78).

**Conclusions:** Findings show no increase in utilization of HIV care or other health services post-PCEPA, and rather a reduction in odds of accessing community-driven supports and health services when needed. Findings demonstrate that end-demand approaches to criminalize sex work may not only reproduce the harms of previous criminalized approaches to sex work in Canada, but may further exacerbate barriers to accessing health and community-led services that have been proven to be key contributors of better health outcomes. There is a critical evidence-based need to move away from criminalized approaches to sex work to ensure full labor and human rights for sex workers, including access to health, social, and legal support services.

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